

Yakima Town Hall meeting
June 12, 2002
EPIC Center, Yakima

About 60 people attended the Medicaid and SCHIP Reform Waiver meeting in Yakima. The meeting was held in a newly constructed EPIC Center complex on Yakima's north side, apparently causing some inadvertent confusion for residents who expected it to be at the old center. Assistant Secretary Doug Porter apologized for the mixup. Several Spanish-speaking participants also expressed interest in having an outline of the amended waiver proposal translated into Spanish. Porter said his staff would prepare one and make it available for future meetings, including posting it on the waiver Web site.

Key points of the Yakima discussion:

- **CAP waiver:** Overall, the Medicaid and SCHIP Reform Waiver will not affect the home-care and other long-term care benefits available to some disabled persons and their families under the Community Assistance Program (CAP) waiver administered by the Developmental Disabilities Division of DSHS. However, some disabled adults on optional medical programs could be affected through the loss of dental, vision, and hearing services under benefit design changes under the waiver. Concerns about the CAP Waiver continue to be raised at Town Meetings by parents of disabled children.
- **Other states' belt-tightening:** A representative of AARP questioned whether other states have implemented provisions similar to those in the Washington waiver proposal. Porter noted that California had implemented or planned to implement all of the same things – premiums for certain populations, co-pays, an enrollment freeze – but that California and other states adopted those provisions as they expanded their programs. Washington expanded its protection without adding those cost-containment tools and now must go back and get permission to deal with the sour economy.
- **Legislature's role:** How will the Legislature participate in the waiver proposal? Several people asked this question in different form through the night. Porter said he felt the legislators by next winter would see it as a valuable short-term solution. "My best guess is that with the economic picture we're talking about here, they will grow impatient... They'll see the Medicaid budget as out of control, consuming every available dollar that otherwise could go to transportation, education, all the other state priorities.... If we don't give people some sense that the Medicaid program is manageable, they will move on and approve cutbacks... that have even more consequences."
- **Waiver changes:** Once approved by the federal government and the Legislature, could the waiver be changed by the state? Porter noted that the waiver could be amended at any point, although both state and federal approval would be required. Gantz said demonstration waivers like Washington's typically are approved for five-year periods with three-year continuations.
- **Public input:** The parent of three children asked: "Can we stop this from going further?" Porter replied that public input will influence the waiver process at several points. The Town Hall meetings are helping shape details of the proposal. The finalized proposal will go first to the Centers for Medicare and Medicaid Services (CMS). Then it will go to the Legislature, both to the health committees and to the budget writers. Porter was also asked, "How much difference will these public meetings make? Because if it didn't make any difference, then you've wasted your time and you've wasted my time." Porter said the meetings have been valuable and will help shape the proposal, but that participants should expect some form of the amended waiver will go to CMS so that, if approved by the federal

government, the Legislature will be able to review and act on it in next winter's budget session.

Written testimony from Yakima County Health Care Coalition

Written testimony from Washington Chapter of American Academy of Pediatrics

Other comments during the evening:

► “There are several of us here representing the Yakima County Health Care Coalitionour members include providers, hospitals, pharmacists...elected officials... Some of the proposals we'd heard about and one of the struggles we've had is that we've heard about the hot topics, but we're missing some of the details...So from the coalition, we would ask that we be involved in these details... We understand budget concerns....and I appreciate that you have described the waiver as a tool kit....and I want to remind you that most good carpenters measure twice and cut once....”

► “Our group strongly opposes the enrollment cap... Uninsured families take longer in getting health care, and it winds up costing more....The enrollment cap is not a viable solution...”

► “In terms of health premiums, again, we cannot support health premiums....even charging a family only \$10, for a family just above the federal poverty level, this is a lot of money...And what is it going to cost the state even to collect that \$10?”

► “In terms of the co-pays, we can support that to an extent, particularly the drug co-pay proposed here ...But we cannot support co-pays for emergency room visits because that is basically a cost shift to the hospitals....We would like to see patients out of the emergency room for inappropriate care, but we would like to work with you on that for a more reasonable solution.”

► “Benefit design...The Coalition may support a limited redesign of benefits, although we would like to see the cost-savings effect of such an effort....We would like to limit the number of benefit packages so both from your side and ours as providers so it would be less of a burden... We would like to limit ancillary services unless they are medically necessary.”

► “We would support the use of unspent SCHIP funds... However, we also understand that can be done separate and apart from the Medicaid waiver....”

► “The other recommendations, rather than paring down benefits or having waiting lists, we would suggest the possibility of lowering the income level for families... That's not something we would like...but we see that as a possibility in tight times... Our focus is on the highest need...When we are in a mode as we are now, when we have to make tough decisions, then we need to zero in on the highest need...”

► “The state Legislature during the past legislative session decided to cut people's SSI by \$15-\$25 a month...These clients are already below the Federal Poverty Level...and now you propose also to get rid of their dental and vision care... I don't think so... I am a representative parent and guardian...Between SSI and work, he does not have a dollar to spare for premiums, co-pays or dental or vision care...and I think the state Legislature is guilty of not notifying people that their checks were going to be cut and how much they were going to be cut....”

► “I have a lot of concern and a lot of it is based on background ... In this area we already face the loss of Medicaid service to about 3,000 children who will be transitioned to Basic Health... Yet in the last three years... we have clearly seen a rise in immunization rates and a decrease in the child hospitalization rates.... I think the drug co-pay of all the things that have been described here is the only one I could support... I don't think that going to harm anybody. I think the co-pay on the emergency room use is not going to work... To ask a patient to pay that money, it won't get paid, and the hospitals won't get enough money from it to make it worthwhile to bill them...”

► “I have the same concern about premiums. Lose access to health care, if children don't have access to health care, they won't get their immunizations... If you miss your immunization and you're two months old, and you're on some kind of premium or enrollment cap... And the enrollment cap is the worst thing of all... a child faced with an enrollment cap will not receive any service at all ... Ironically, if they would just pay providers enough to see children, the cost of those children will go down...”

► “One of my main questions is why you had the meeting in this place? It was really hard for us to find this place and we didn't know where this place was... when I got here, I only see people from the hospital and other providers – We (clients) should be here... I think you should have had this meeting somewhere else where it could have been more visible.... so that it can be heard... see what we are going through right now...”

► “I heard that one of the clinics is saying we can't afford a co-pay of \$5 – to tell the truth, some people cannot afford \$1... It is not fair for children, because they are the ones who need health care the most... and when you say hospitals have to see us without charging us, it's not true... My daughter was seen at the Farm Workers Clinic and one of the bills, for \$20, was sent out for collection without telling her... A child who has a fall in his own house... the medical bill will have to be paid by his household and not Medicaid... The reality is that insurance premiums are real high and they don't care about what we are going through... I make \$220 a week and I pay \$80 month to the Farm Workers Clinic... I'm not eligible for Basic Health program... I'm not going to a dentist because I can't pay for those services... I'm having a thyroid problem and I'm also having depression... thyroid problem... That is my specific case, and my coworker said to me, 'We're going to have to die because we don't have the money to pay for services...' That's why the question should be asked of us.”

► “Back in the 60s, farm workers... were pretty much excluded from a lot of services... We're going back to that, that is my point.... Secondly, with the enrollment cap, when people's children get sick, unfortunately because they leave and work... but if they are on the waiting list, who will they turn to? Will the people go to the hospital and to the clinics? We're not going to reduce the medical cost to the people of Washington, we're going to increase it... And there will be new families coming to Washington state.... How will they find care?”

► “Are YOU going to be affected by this? I don't think so. How many of us are going to be affected... The number on this was not publicized enough.... especially with the Hispanic population, because we are few here.... I want to congratulate all the social workers and the people who are here because they care about us... Thank you.... But the other people, the people who are doing this are deciding the fate of our children... I cannot afford to face insurance for my children... My children have medical coupons.... Every day I go to work... without money for food, much less money for co-pays or premiums... I don't see how you guys can propose something like

this...Many children will die...You are in your high post and your high job...What about this? ...I resent this, I really resent this...”

► “We have to do something. We cannot let these measures go through.....Go down to the river and see how many people are there without any houses...How many elderly people are there who cannot afford to pay \$5?”

► “I’m really concerned about co-pays and premiums because obviously people getting medical coupons have no extra money...If you have no doctor you can wait a long time without seeing a provider....I don’t think it’s feasible for people to pay premiums...We’re just putting more burden on the people we should be helping get out of these circumstances...I think it’s not fair...”

► “It’s probably much more difficult being in a rural area...People have to wait six weeks to see a doctor and wait a year to see a dentist. All that does is drive people into the emergency rooms.”

► “I work with underserved families...but I come from a country, UK, where everybody has health care, and the Medicaid waiver I see as a regressive step, back to the Dark Ages, where children have no rights, no right to health care...I don’t see any part of this waiver that benefits any of my patients...They don’t have the resources to manage premiums, copayments....If this waiver goes through, we’re going to be a lot worse off. Children ... are our future, and that’s why I’m here today, to speak on their behalf.”

► “I also visit the food banks around the region and I see that there are a growing number of elderly people visiting the food banks. ...They are not going to be able to make premiums...because they are stretched to the limit... Using the federal poverty guidelines is another thing...There has been a study done....and it shows what it really takes to have a self-sufficient family...what it takes to get through....It costs \$30,000 minimum for a family...figures like \$17,000 for a family of four, that’s ridiculous! That’s why they keep going to 150 percent or 200 percent of federal guidelines. Those guidelines were outdated years ago....”

► “I just put my significant other in the nursing home...when she needed more, she had to come up with \$500 a month before the premium would partially pay for medical...just recently...I asked Sen. Alex Deccio in a letter if we were facing political terrorism in order to get help... It looks like everybody is staying...We are facing a very big crisis... and a lot of people are going to be hurt if we don’t do it right the first time...I’m not willing to wait three years...It needs to be solved now....”

► “You don’t know because you didn’t ask the people who will be affected by this...The people have already been affected by this, way back...With this proposition, there will be no change for people...They’re going to have to spend the money they’ve been trying to save, to be a lawyer, to be a doctor, to change from years and years before....We’re trying to change that... And what’s going to happen with this waiver...and its premiums and co-pays? ...Right now, just not for me, for many families, to afford to pay a premium and a co-pay as you have mentioned...So what’s going to happen? They’re not going to have the service...Stop and consider and take a real consideration...They didn’t plant much hops here this year, so there’ll be less work for farm workers...Businesses are going to wait...”

► “First thing I wanted to say was that if you are a moderate English Language Deficient person and speak Spanish, Basic Health is a fraud because it doesn’t cover translation services...It is a

fraud in a second way, too, because it is not an insurance program... So if you're going to shift people away and into Basic Health, you must first reform the Basic Health to keep it from being a fraud.... And unless we can make it a true insurance company to regulate it as we do Blue Cross..."

► "I've seen patients turned away at the door, not because the provider didn't want to treat them, but because Group Health would not provide the interpreter service so they could understand.... We are dealing with faulty political premises... and the solution to them is to depend on political action by the people of Washington state..... I control the Legislature, the voters of Washington state control the Legislature..."

► "Let me make one final observation... I note that seniors maintain a lot of the benefits that they had before the waiver... I further note that on the national scene we are moving toward a Medicare-based prescription drug program.... In Washington state, because of the outrageous increases in prescription drug costs... we are literally being robbed blind by big PhRMA.... so there must be a national solution, and there is very little that Washington state can do on its own to challenge the power of big PhRMA.... So I would suggest... strictly from a machiavellian sense... that you cut seniors off from prescription drug coverage. So that you deny them that political safe haven, so they go to Congress and demand the kinds of changes, the only kinds of changes that will bring this program back into balance.... Being at the end of their life, seniors know that any responsible triage will cut them out... All you really do is sentence some poor child to an early death or a lifetime of suffering...."

► "It just seems to me on the issue of who's utilizing Basic Health, you're going to see the numbers in the transition -- you're going to see thousands of kids who aren't going to have coverage.... and you're going to have real good numbers in a few months to see that..."

► "Speaking for AARP, we do lobby the legislators and write letters, and we send a lot of letters... Every citizen in this county has a right to get that 800 number and call your legislator... You don't have to be a registered voter... to call and get your vote in... We are in a free country... that's one of the first things, to be able to speak up. And I hope everybody will do more of that.... Stand up and be counted, and on every issue, not just this one tonight..."

► "In all due respect I would like to ask a question: I would like to know why you didn't put any information in Spanish... and you didn't include any information in Spanish... This meeting that you are having now, it seems to me that you have everything ready to go and this is just a game..... you are saying that you want to know how to make the cuts, where to make the cuts, and the waiver is almost approved."

► "Poorer families will have to apply for the Basic Health plan... and we have to look at this just like everybody else who has the money for the service.... and I wonder what's going to happen in five years, because we are impoverished people... The state is making us poorer and poorer... It's embarrassing me, both for legislators who are not doing anything... It's embarrassing for me... showing us that are completely different to what he tells... While making cuts for the poor, the government is finding ways to help the employers who lose the crops... They are trying to help them, but what happens to us? ... The assistance we are supposedly getting... is no help, because we are paying our taxes, we are paying for those services... I don't consider this to be something that we're getting for free... We're paying for this!

► "...This facility that you chose to have the meeting at....Nobody is aware of this place...I don't think that the government doesn't have any money to rent a place or a place...Please, when you go back to Olympia, say hi...and ask them to remember that we are the people who are working hard and doing the jobs that nobody wants to do...."

► "In the past year, I ended up getting really, really sick... This just with a co-pay we had to pay....Even for those of us with private insurance, medical costs are really outrageous...I'm just really saddened and scared by how many doctors I had to see just to get a handle on my care...I have been sent to almost every doctor, and lab work is in the thousands of dollars, and I finally told my primary care provider that I couldn't handle this anymore...That's what really breaks my heart...My health can come and go, and I can find resources...but it breaks my heart when I go into a meeting and hear a mother with a 21-year-old with a developmental disability, and she says she can't afford to take him to the doctor anymore....She has to wait until he is in an emergency situation, until he is close to death, before they can go....I also have the other side of this...We're at a point where free medical care is no longer anywhere...and I know that there are people who cannot pay that dollar co-pay, but hey, they will try to pay it...I know around our state we have clinics that are federally subsidized...so then why do we still have the expectation of people having a co-pay? People who just don't have any other medical care?This lady talked about a \$20 billing ending up in collection, so now you have to end up with hundreds of dollars owed...

► "I'm a family doctor....I don't blame DSHS for the budgetary problems that we have in Washington state... That is pretty much the voters' responsibility and I don't blame DSHS for the difficulties... in private practice medicine...or the sort of runaway rapacious demand for services in general....But I have been practicing medicine in Yakima for almost 19 years...and over that time, DSHS also has not been a very efficient or effective purchaser of care for its patients, nor have they been very respectful for the needs for providers...who are trying to practice medicine and provide services in the state... Let me cite some specifics that you've probably had people throw in your face before. DSHS has instituted a new program, so when a patient has more than four medicines that are non-generic...then you're supposed to call this 800 number and spend some time on hold...and then you talk to your pharmacist, and what they really mean is, if it's a brand name medicine and it's overpriced...and none of this is written down and it's supposed to be negotiated over the time with these ridiculous phone calls that I have to make...and that is a patently ridiculous system! ...There are models in the private insurance market to take care of that situation much more effectively.... On the other hand, DSHS also has been far more generous, far more generous than private payers, which is not a very efficient utilization of your funds...Secondly, in the time since the Healthy Options program was instituted, which was maybe eight years ago...I've had contracts for a number of Health Options patients at times and none at times...It was actually way better when we didn't have anybody...Blue Cross has not been a particularly honest or effective insurance broker...Why pick them as a partner to cover this program? ...I think that DSHS ought to be more careful with whom they partner because there are insurance companies that do better than that...So don't pick the worst ones..."

► "When you talk about pharmaceutical lobbying, and when the choice is between that and keeping people on your rolls, then the higher priority is to keep people on your rolls."

► "I'm very upset...for your having had this meeting in such a secluded piece, very unknown to us...This is the second time that I showed up for a meeting like this...Where are those people who are being affected? They didn't even know about this meeting...I didn't have enough time to let the people know who might be affected, although I would have wanted to invite all of them, but they

could not have all come...I want to know how far or to what extent our voice will be listened to... I would like to tell you that in representation of all the people who are being affected, I am affected and my children...and I would hope that you could be in the shoes of all those people because they don't know what changes are going to happen and what might happen...They're already swimming against the current and barely making ends meet, and now with this co-payment...if it's really in your hands, take with you our voices and analyze this, and not just with your head but also with your heart..."

► "I think there would be respect to us, because I was trying to get some people to come to the meeting...I tried to find the location...But it wasn't on the map, it wasn't available...Next time, then you try to find a better location..."

► "I used to work at a packing plant place, and it was very hard... and I know from my own experience, now I make a little more money, not a whole lot, since I got this different job, my new job. But now I can't qualify for benefits and yet I don't make enough money to get insurance, so there are people like myself who are trying to get out of these levels, and this waiver I feel is just trying to keep people down...We're having a very hard time and to survive, to make it, on this transition we're trying to make, we're trying to go to another level, but it's very hard....There is a lot of people I know ...It's very hard for them....You keep fighting and fighting but this (waiver) is something that 's going to make it harder...."

► "I have been listening to all of the proposals, and I haven't heard any proposals for those who get on-the-job injuries...I had an on-the-job injury...I broke my hand with a drill...Now my hand is still hurt and I cannot work...They laid me off about a year ago in regards to my injury because I couldn't do my job....L&I holds my case...out of my own pocket, or borrowing money, or even asking for money, it's embarrassing...I tried to see a doctor, but they deny the services. They say I am OK but that's not true. When you cannot do the job, are they just going to let it go? What can I do to support my family? ... I think there should be a right for a person who gets an injury on the job...so you have rights when a doctor at Labor and Industries closes your case...I think you have to listen to all those people who need the medical attention who hurt themselves son the job."

► "Let me tell you...I'm very familiar with the problem that farm workers have with Labor and Industries...We just won a lawsuit, but it took us over 10 years to do that....It took us 11 years to get the state to respond to another particular issue...The United Farm Workers is engaged in a long study...97 percent of the farm workers who have injuries on the job are not satisfied with the treatment they got or with the Department of Labor and Industries...It is a very big problem in the community...it is very difficult...."

► "One of the things that I'm sure you understand is that the passion you heard here tonight has a lot to do with the population that resides here. Forty-three percent of the (Yakima County) population is dependent on some form of help from DSHS...and a lot of that is medical assistance....It triples the impact of what you might feel in Olympia. ...We're very concerned about that as a community, and I think that's something not to overlook... It's something much more than cutting an individual's benefits....So please keep that in mind...."